

L16000221778

Florida Department of State
Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PEDRO MIGUEL BUSINESS CONSULTING LLC

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

PEDRO MIGUEL BUSINESS CONSULTING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/07/2016 and assigned Florida document number L16000221778.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 444 Brickell Ave, Suite P-15
(Principal office address MUST BE A STREET ADDRESS) Miami, FL 33131

Enter new mailing address, if applicable: 444 Brickell Ave, Suite P-15
(Mailing address MAY BE A POST OFFICE BOX) Miami, FL 33131

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
City Zip Code

New Registered Agent's Signature. If changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Tavares Ramos Grizolli, Bruna	444 Brickell Ave, Suite P-15 Miami, FL 33131	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
AMBR	Hemandes Coppini, Andre Vinicius	444 Brickell Ave, Suite P-15 Miami, FL 33131	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
AMBR	Pinguer Kalonki, Andre	444 Brickell Ave, Suite P-15 Miami, FL 33131	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
AMBR	Salum Bonini, Thais	444 Brickell Ave, Suite P-15 Miami, FL 33131	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
AMBR	MIGUEL, HEITOR	3111 N UNIVERSITY DR STE 105 CORAL SPRINGS, FL 33065	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
AMBR	MIGUEL, PEDRO	3111 N UNIVERSITY DR STE 105 CORAL SPRINGS, FL 33065	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	MIGUEL, HEITOR	444 Brickell Ave, Suite P-15	<input checked="" type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
AMBR	MIGUEL, PEDRO	444 Brickell Ave, Suite P-15	<input checked="" type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

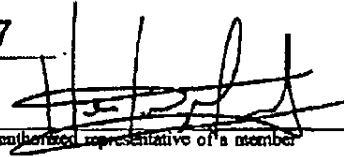
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)
 (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JANUARY 24, 2017



Signature of a member or authorized representative of a member

HEITOR MIGUEL

Typed or printed name of signee

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